Planning Application



Community Development Department
39550 Liberty Street, P.O. Box 5006, Fremont, CA 94537-5006
510 494-4440 information | 510 494-4443 appointments

FIEIIIOIIL 510 494-4440 information 510 494-4443 appointments	
Case Number:	
Vork Order Number:	
ART I APPLICANT - PLEASE PRINT CLEARLY AND FILL IN ALL APPLICABLE SECTIONS	Total Deposit Fee: \$
APPLICANT - PLEASE PRINT CLEARLT AND FILL IN ALL APPLICABLE SECTIONS '	

For Finance Staff Use Only

APPLICANT - PLEASE PRINT CLEARLY AND FILL IN ALL APPLI	CABLE SECTIONS							
Project Name: (one letter per box)								
Project Site Address:								
APN	APN							
APN	APN							
Project Description(Attach additional sheets if needed):								
APPLICANT: Name and mailing address of person requesting the filing of this application. NAME:	MAIN CONTACT PERSON: Person to be contacted other than applicant regarding this application □ ARCHITECT □ ENGINEER							
COMPANY:	☐ TENANT ☐ OTHER							
ADDRESS:	NAME:							
CITY/STATE/ZIP:	COMPANY:							
PHONE #: FAX#:	ADDRESS:							
E-MAIL ADDRESS:	CITY/STATE/ZIP:							
SIGNATURE:	PHONE #: FAX#:							
	E-MAIL ADDRESS:							
PROPERTY OWNER AUTHORIZATION:	Upon three days prior notice by City of Fremont staff, I shall provide access to the subject site for City officials, staff, their agents, and consultants for the purpose of planning and development application review and inspection. Myself or my agent may accompany such persons while they access the site. If I fail to respond to a request for access within three days, City officials, staff, their agents and consultants are authorized to							
NAME:								
COMPANY:	enter onto the site for such review and inspection. CHOOSE ONE:							
ADDRESS:	 I am the sole owner and hereby authorize the filing of this application I own the project site jointly with one or more persons and am 							
CITY/STATE/7ID:	empowered to authorize the filing of this application on behalf of my fellow property owners; or,							
CITY/STATE/ZIP:	□ I own the project site in conjunction with one or more persons who are listed with their acknowledgement and authorization for							
E-MAIL ADDRESS:	the filing of this application attached for additional property owner authorization/acknowledgements.							
	SIGNATURE:							

CASE	No:		

		Staff	use only				
ADM □ PRP *+ □ ZA – new application *	\$5,000 \$1,300	VAR □ Variance		\$1,200	MIS CASE Amusement Device	\$	50
□ ZA Amend # * □ Lot Combo + □ Lot Line Adjustment * □ Mod *	\$ 600 \$ 600 \$1,600 \$ 200	ENV □ EIA* □ EIR * □ Consultant Services		\$2,500 \$ \$	□ Appeals to Planning Commission (Case No) □ Certificate of Compatibility * □ Conditional Use Extension * □ DEX	\$ 3	35 100 350 200
DES DES DEM DOL DEW (Wireless) DOSS (Second-Story) HARB – Arch. Review *+	\$4,000 \$1,800 \$1,800 \$1,300 \$1,800 \$3,500	PUD PUD – new applicate PUD Amend *+ GEN GPA *+ Finding - Land Use	tion *+	\$2,500 \$3,000 \$2,400 \$2,000	 □ HARB - Sign □ Large Family Day Care a Public Hearing required a Public Hearing not required □ Mobile Home Cert. □ Modification of Subdivision Regs. □ ZA Extension 	\$ 2 \$ 2 \$ 5 \$ 2	225 450 150 100
□ Prelim. Grading *+ □ Private Street *+	\$1,600 \$ 700	DEV □ Development Agre □ Dev. Agreement Ar 		\$1,450 \$ 500	□ PSP □ PSP Amend TPM Ext. (#) *	\$ 2	225 225 300
☐ Use Permit – new application *+☐ Use Permit Amend *+☐ Finding – Architecture/Site *+☐ Use Permit Amend *+☐ Use	\$4,100 \$2,400 \$4,000	ANX Ag Preserve: Cance Ag. Preserve: New		\$1,900 \$1,900	PLN DEPOSIT FEE SUBTOTAL MIS FLAT FEE SUBTOTAL	\$_ \$_	
REZ ☐ Plan. District ☐ Preliminary *+ ☐ Precise *+ ☐ Prelim. & Precise *+ ☐ Maj. Amend # *+ ☐ Min. Amend # *+ ☐ Rezoning *+	\$6,000 \$6,000 \$12,000 \$3,000 \$1,500 \$1,000	OTHER Certificate of Compl Easement Abandon Street Abandonmer (Vest or Non-Vest) Parcel Map No (Vest or Non-Vest)	ment * nt * Tentative	\$1,000 \$2,000 \$1,900 \$4,000	TOTAL DEPOSITS AND/OR FLAT FEES \$		
☐ Zoning Text Amendment *+	\$1,600	Tract Map No Tentative Tract Exte Map No (OR LIST)	ension *	\$4,800 \$1,800 ——— \$	* = CTCC Meeting recommended + = Applicant Meeting recommenden	ded	
PREVIOUS ACTIONS AND APPLICA	ATION FILE	NUMBERS:					
COMMENTS:							
ABOVE TOE OF HILL? TYES THE)					-	
ATLAS PAGE: 5C - 3		REVIEWED BY:	□ ADMIN □ CI ARB □ PC □ C I		REC. DATE:/ BY:		
NOTIFICATION REQUIRED?	BUFF	FER DISTANCE: FEET MILE	PROJECT N	IANAGER:			

Reimbursement Agreement

PART II

CASE NO

Ι,	, the undersigned billing party, am depositing
\$	to cover staff review, coordination and processing costs based on real time expended.
lι	understand and agree to the following conditions of this agreement:

- 1. Staff time from some City of Fremont departments spent processing my request will be billed against the deposit fee. "Staff time" includes, but is not limited to, time spent reviewing application materials; site visits; responding by phone or in writing to inquiries from the applicant, the applicant's representatives, neighbors, interested parties; attendance and participation at meetings and public hearings; preparation of staff reports and other correspondence; and engineering, landscape and planning construction inspections for compliance with approved plans.
- 2. This deposit typically covers only a portion of the total processing costs. Actual costs for staff time are based on individual hourly rates and service/material costs such as publication and postage. These costs apply even if the application is withdrawn or not approved. In the likely event that costs exceed the deposit, I will receive periodic invoices payable upon receipt. Unpaid invoices will be considered late after 30 days. Invoices are sent to the designated billing party on a:
 - a. **monthly** basis when the deposit has been exceeded by \$500.00.
 - b. **quarterly** basis when the deposit has been exceeded by \$100.00 or more. Amounts under \$100.00 are not billed until the project has been completed (see item 5 below).
- 3. I may, in writing, request a further breakdown of billed charges, but such a request is independent of the payment time frames. Pursuant the procedures specified in City Council resolution No. 2010-23, I have the right to appeal any determination or action taken by City staff in connection with administering my deposit.
- 4. Nonpayment of billed charges may result in any of the following actions until outstanding charges are paid in full:
 - a. Temporary cessation of processing my application;
 - b. Withholding final action on my application;
 - c. Cessation of work on all project-related applications and actions including any engineering, landscape or planning inspection of the work;
 - d. A determination that my application has been withdrawal without prejudice and closure of my file;
 - e. Outstanding invoices being sent to a City-designated collection agency;
 - f. Withholding of any approval documentation/subsequent processing of entitlements until full payment is received.
- 5. I authorize the City to offset any shortages in another account(s) on the same application or in any other accounts I might have with the City with excess funds from this account.
- 6. When the project has been completed and the final cost exceeds deposit fee by more than \$15.00, a final invoice will be sent; **and I will pay the difference.** Final costs at or under \$15.00 will not be invoiced. When the final cost is less than the deposit fee, the unused portion of the deposit will be refunded to me.
- 7. I agree to pay the City of Fremont the cost of placing a legal advertisement (if one is required) in a newspaper of general circulation as required by state law and local ordinance.

CASE		
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PART II (REIMBURSEMENT AGREEMENT)

- 8. The City of Fremont may refer my application to outside consultants for the completion of site specific environmental or technical analyses/studies and/or may submit any study submitted with my application to an outside consultant for peer review. Should this type of work be necessary, I will be notified of the scope and cost of the work. I understand that the City of Fremont will set up a separate trust account to pay for this work. Consultant fees are separate and in addition to City deposit fees and shall be paid prior to the commencement of work by the consultant. Selection of the consultant is at the sole discretion of the City, but is typically based upon completeness of the proposal, followed by lowest price and/or expedient timeframe for completion of work.
- 9. I agree to pay all staff costs related to condition compliance/mitigation monitoring as specified in any conditions of approval for my permit/entitlement.
- 10. Upon project approval, I agree to pay the established Alameda County Clerk Recorder the environmental document filing fees (\$50.00 as of January 1, 2010).
- 11. FISH AND GAME REVIEW FEES for discretionary permits and legislative amendments: I further understand that the City of Fremont, or the State Office of Planning and Research, may refer my application and/or any applicable environmental document for my project to the California Department of Fish and Game for review and comment in accordance with the provisions of the California Environmental Quality Act. Should this referral occur, I understand that I must pay all fees as required by Section 711.4 of the Fish and Game Code (\$2,010.25 for Negative Declarations/ Mitigated Negative Declarations or \$2,792.25 for Environmental Impact Reports, as of January 1, 2010). Should these fees be required, I agree to remit a cashier's check or money order in the required amount, payable to the Alameda County Clerk, to the Planning Division prior to any legal notifications regarding public hearings before the decision making body on my application.

Name of Billing Party (Please print)	Phone Number:
Name of Company or Corporation (if applicable): If a corporation, please attach a list of the names and behalf of the corporation.	d titles of corporate officers authorized to act or
Mailing Address	
CITY, STATE and ZIP CODE	
Signature:*	Date:

Consultant List

PL-023/ss - Rev. 2/09

PART III

CASE NO.

,	
Have consultants been identified to assist	with this project? No Yes (if yes, please list the consultants below)
By:	
Name of Person Completing this Form	Capacity Date
planners, real estate agents, and environm	rchitects, designers, contractors, landscape architects, engineers ental consultants. It is important this form be filled out completely nning Commission and staff to avoid potential conflicts of interest ect's approval.
	Capacity:
	Phone No.:
	Capacity:
Company:	Phone No.:
Address:	
Name:	Capacity:
Company:	Phone No.:
Address:	
Name:	Capacity:
Company:	Phone No.:
Address:	
If more room is necessary, you m	ay complete and attach additional copies of this form.

Hazardous Waste and Substances Statement

PART IV

Pursuant to California Government Code Section 65962.5 (AB 3750 – Cortese)

Government Code Section 65962.5 requires that "before a lead agency accepts as complete an application for any development project, ...the applicant shall consult the [Cortese] list and shall submit a signed statement...indicating whether the project and any alternatives are located on a site that is included on [the list]." This form is provided for that purpose.

TO: Community Development Department

City of Fremont P.O. Box 5006

Fremont, CA 94537

I have consulted the current Hazardous Waste and Substances Sites List, consolidated by the California Environmental Protection Agency pursuant to Government Code Section 65962.5 at http://www.calepa.ca.gov/SiteCleanup/CorteseList/ and yearly printed by the City of Fremont available online at www.fremont.gov or available at the Development Center, regarding the development project application herewith submitted.

Based on my consultat	ion, the location	of the project, show	vn below,
() IS	()	IS NOT	
on a site which is include	ded on the attac	hed most recent Ha	zardous Waste and Substances Sites List
Project location:			
If located on such a site	e, print the source	ces of that information	on as shown on the list:
I declare under penalty			
(date)	(month)	(year)	(city and state)
XSignature of applicar	nt (or agent)		
	Print applicant	t name, with agent r	name and title, if any

PLNG. 28 – Rev. 2/09 PL-006/JW 2/09



Community Development Department
39550 Liberty Street, P.O. Box 5006, Fremont, CA 94537-5006
www.fremont.gov

Affordable Housing Plan Proposal

Applicability: Residential projects containing two or more net new living units or residential lots, or a combination of living units and residential lots, are required to provide the affordable housing per Fremont Municipal Code Title 8, Chapter 2, Article 21.7, Affordable Housing. Compliance with the affordable housing ordinance can be achieved through the basic requirement or, if approved, use of an alternative to the basic requirement. Below, identify how the residential project proposes to comply with the affordable housing ordinance by placing a "\(\nu\)" in the appropriate section.

Basic Requirement: The affordable housing obligation is achieved differently for for-sale and rental residential
projects, as described below:
For-sale projects: For projects deemed complete by December 31, 2014, at least 15% of all living units in any for-sale residential project shall be made available at affordable cost to moderate income households. Effective January 1, 2015, the project's affordable requirement increases to 20% of alliving units. (FMC §8-22172(a)(1))
Rental projects: Rental projects not receiving any City assistance comply with the affordable housing obligation through payment of the affordable housing impact fee. (FMC §8-22172(b)(1))
Alternatives to Basic Requirement: If one of the allowed alternatives to the basic requirement is proposed
identify the alternative below and describe how the project would comply with the specific FMC requirements
for alternatives (FMC §§8-22177(a) through 8-22177(f)).
Provision of rental units: Where ownership affordable units are required to comply with the basic requirement, the applicant may construct rental units affordable to moderate, low, and very low income households at rents prescribed in FMC §8-22177(a)(1). (FMC §8-22177(a))
Off-site construction: The applicant may propose to construct affordable units on another site. (FMC §8-22177(b)
Property dedication: The applicant may propose to dedicate, without cost to the City, property within or contiguous to the residential project sufficient to accommodate at least the required number of affordable units for the residential project. (FMC §8-22177(c))
Purchase of existing market-rate units: The applicant may propose to purchase existing market-rate units not subject to any affordability covenants and convert them to affordable housing, or to purchase affordability covenants for existing market-rate units, to provide the required affordable housing. (FMC §8-22177(d))
Preservation of affordable units at risk of loss: The applicant may propose to preserve existing affordable units at risk of loss to provide the required affordable housing. (FMC §8-22177(e))
<i>In-lieu fee payment:</i> The applicant may pay a fee in-lieu of construction of affordable units on site (FMC §8-22177(f))

Achievement of Alternative Requirements: If an the requirements for the selected alternative, as of		
achieved (attach a separate sheet, if needed):		
Signature of Applicant	Date	
Applicant's Printed Name		

Case No.:

Development Statistics PART V

CASE NO: _____

Please print clearly and fill in all applicable sections

SE	ECTION 1: ZONING AND GENERAL PLAN INFORMATION
a.	What is the property currently designated for:
	ZONING:
	GENERAL PLAN:
b.	Are any changes being proposed to either the Zoning or General Plan? NO YES. IF YES, list the new Zoning District or,
	General Plan designation(s) as appropriate
	ZONING: and/or
	GENERAL PLAN:
SE	ECTION 2: SIZE OF DEVELOPMENT AND NUMBER OF LOTS
a.	What is the total land area of the project site? □ SQ. FT./□ ACRES.
b.	How many lots does the project area currently contain?LOTS
C.	Do you propose to subdivide the project site and thereby increase the number of lots? ☐ NO ☐ YES If yes, are the total
	number of lots?lots
d.	Is the site currently vacant? ☐ NO ☐ YES.
SE	ECTION 3: HISTORIC INFORMATION
b. c. d.	Were any structures located on the project site constructed prior to 1956? □ NO □ YES – If YES, when was the structure built? Year built How is this structure being used? Describe generally where this structure is located on the project site? Is the site or any of the structures considered to be historically significant? □ NO □ YES. What type of historic designation? (check one) □ Federal; □ State; □ Landmark; or, □ Local Is the site or structures known by a particular name? □ No □ Yes – If Yes, list its name – □ Site □ Building
SE	ECTION 4: EXISTING RESIDENTIAL
a.	Does the project site currently contain any residential dwellings? ☐ NO ☐ YES. If YES, what is the total number of units?Units.
b.	Indicate the number of units by type: Single Family Detached; Single Family Attached; Townhouses; Condominiums; Apartments
C.	Are there any existing affordable housing units on the project site? NO YES. If YES, how many affordable housing units does the development contain? Affordable Units.

	CASE NO:
SE	CTION 5: NEW RESIDENTIAL: PROPOSED OR CHANGES TO EXISTING
a.	Do you propose to increase the number of affordable units? NO YES. – If YES, how many units? Affordable units
b.	Do you propose to add any new units to the project site? NO YES. If YES, what are the types and number of units: Single Family Detached; Single Family Attached; Townhouses; Condominiums; Apartments
	Do you propose to delete any residential units from the project? ? □ NO □ YES. If YES, what are the types and number of units: Single Family Detached; Single Family Attached; Townhouses; Condo.; Apartments
SE	ECTION 6: RESIDENTIAL PARKING INFORMATION
a.	How many COVERED parking spaces are currently being provided per dwelling unit? spaces
b.	How many UNCOVERED parking spaces per unit? spaces
c.	Given the total amount of parking spaces being provided, list the number of spaces by their types:
	COVERED: No. of Standard; No. of Compact; No. of Handicapped Van; No. of Handicapped Car; No. of Bicycle Spaces; No. of Motorcycle; No. of Off-Site; No. of Other
	UNCOVERED: □ No. of Standard;□ No. of Compact; □ No. of Handicapped Van; □ No. of Handicapped Car; □ No. of Bicycle Spaces; □ No. of Motorcycle; □ No. of Off-Site; □ No. of Other
d.	Are any changes being proposed to the number of available parking spaces? NO; YES. If YES, will there be an increase or decrease in the total number of spaces. Increased by spaces; Decreased by spaces.
e.	Indicate the revised composition:
	COVERED: \(\bigcup_{\text{\colored}} \) No. of Standard; \(\bigcup_{\text{\colored}} \) No. of Compact; \(\bigcup_{\text{\colored}} \) No. of Handicapped Van; \(\bigcup_{\text{\colored}} \) No. of Handicapped Van; \(\bigcup_{\text{\colored}} \) No. of Off-Site; \(\bigcup_{\text{\colored}} \) No. of Other
	UNCOVERED: □ No. of Standard;□ No. of Compact; □ No. of Handicapped Van; □ No. of Handicapped Car; □ No. of Bicycle Spaces; □ No. of Motorcycle; □ No. of Off-Site; □ No. of Other
SE	ECTION 7: EXISTING NON-RESIDENTIAL
a.	Are there any existing non-residential buildings on the project site? \square No \square Yes If yes, what is the combined total floor area of the buildings \square Sq. Ft.
b.	Indicate which non-residential uses are currently existing on the project site: ☐ General Office; ☐ Medical Offices/Clinics; ☐ Warehouse; ☐ Retail; ☐ Industrial R&D ☐ Industrial Speculative Bldg.; ☐ Religious Institutions/Facilities; ☐ Child Day Care; ☐ Hotel/Motel; ☐ Services; ☐ Other
C.	Please provide the following information on existing land uses, where applicable: Number of - □ Seats (Religious Institutions, Restaurants); □ Children (Child Day Care); □ Students (Schools); □ Beds (Residential Care Facilities); □ Rooms (Hotel/Motel).

CASE NO:					

SECTION 8: NEW NON-RESIDENTIAL: PROPOSED OR CHANGES TO EXISTING

a.	Are any new land uses being proposed for the project site? NO YES. If YES, Indicate which uses are being proposed – General Office; Medical Offices/Clinics; Hotel/Motel; Retail; Warehouse; Services; Industrial R&D Industrial Speculative Bldg.; Religious Institutions/Facilities; Child Day Care; Other			
b.	Do you plan to add any new floor area? NO YES - If YES, how much additional floor area? : Sq. Ft.			
C.	Please provide the following information for the proposed uses, where applicable: Number of - □ Seats (Religious Institutions, Restaurants); □ Children (Child Day Care); □ Students (Schools); □ Beds (Residential Care Facilities); □ Rooms (Hotel/Motel).			
d.	d. Are any uses being removed/deleted from the site? □ NO □ YES. If YES, indicate which uses are proposed to be removed/deleted - □ General Office; □ Medical Offices/Clinics; □ Hotel/Motel; □ Retail; □ Warehouse; □ Services; □ Industrial R&D □ Industrial Spec Bldg.; □ Religious Institutions/Facilities; □ Child Day Care; □ Other			
e.	Do you plan to reducing the amount of floor area devoted for non-residential use? NO YES - If YES, what is remaining amount of non-residential floor area?: Sq. Ft. of non-residential use.			
SE	ECTION 9: NON-RESIDENTIAL PARKING INFORMATION			
a.	What is the total number of parking spaces currently available for the project? Total spaces			
b.	Given the number of available spaces, how many are:On-site; Off-site			
C.	List the number of existing parking spaces by their types: No. of Standard; No. of Compact; No. of Compact; No. of Motorcycle; No. of Off-Site; No. of Of			
d.	Are any changes being proposed to the number of available parking spaces? NO; YES. If YES, will there be an increase or a decrease in the total number of spaces. Increased by spaces; Decreased by spaces.			
e.	Indicate the revised composition: : No. of Standard; No. of Compact; No. of Handicapped Van; No. of Handicapped Car; No. of Handicapped Ca			